

**SEMINOLE COUNTY GOVERNMENT  
AGENDA MEMORANDUM**

**SUBJECT:** Sole Source Procurement for LifePak 15 Cardiac Monitor/Defibrillator System Equipment and related appurtenances including service and warranty

**DEPARTMENT:** Administrative Services

**DIVISION:** Purchasing and Contracts

**AUTHORIZED BY:** Frank Raymond

**CONTACT:** Lisa Spillman

**EXT:** 7118

**MOTION/RECOMMENDATION:**

Authorize Sole Source Procurement and the issuance of Purchase Order(s) for new technology of LifePak 15 Cardiac Monitor/Defibrillators System Equipment and related appurtenances including service and warranty to Physio Control Corporation, Redmond, WA, Division of Medtronic, Inc. based on approved Department budget.

County-wide

Ray Hooper

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**BACKGROUND:**

The LifePak 12 System that the Seminole County Public Safety Department is currently using is being replaced by the LifePak 15 models. These new models incorporate advances in technology in the emergency medical care. Some of the enhancements include, but are not limited to: Aggressive myocardial infarction monitoring; Automatic transmission of a new ECG when changes occur; Non-invasive dynamic monitoring of blood levels of carbon monoxide and methemoglobin among others. The new units incorporate new lithium-ion battery technology that provides longer operating life and service life, potentially reducing the need for battery replacements, as well as improved monitoring screen visibility and protection. The LifePak 15 has been upgraded to an active LCD screen that makes it easier to see the monitoring data in any light condition. The LifePak 15 will use the same defibrillator patches, EKG monitoring leads, cables and tracing paper as the LifePak 12. These items are interchangeable between the two (2) models and this upgrade will not require the County to stock different components. The Public Safety Department recommends maintaining a replacement schedule of all cardiac monitor/defibrillators by acquiring five (5) LifePak 15 units per year over the next 10 years. The procurement of these units and components will be based upon the approved Department budget. The estimated annual usage may vary between \$200,000.00 and \$250,000.00 based on a discounted unit cost of approximately \$26,500.00 per unit plus the costs of any pertinent components. The county will utilize any trading opportunity to maximize savings.

**STAFF RECOMMENDATION:**

Staff recommends that the Board approve the Sole Source Procurement and authorize the issuance of Purchase Order(s) for LifePak 15 Cardiac Monitor/Defibrillators System Equipment and related appurtenances including service and warranty with Physio Control Corporation, Redmond, WA, Division of Medtronic, Inc. based on approved Department budget.

**ATTACHMENTS:**

1. Sole Source LifePak 15
2. Sole source form

**Additionally Reviewed By:**

☒ County Attorney Review ( Ann Colby )



Physio-Control, Inc.  
11401 Wilshire Blvd., Suite 1100, Los Angeles, CA 90025  
Tel: (818) 707-4000 Toll free: 1-800-441-1111

[www.physio-control.com](http://www.physio-control.com)

October 20, 2009

Seminole Co Fire & Rescue  
ATTN: Chief Ivan Mustafa  
150 Bush Blvd  
Sanford, FL 32773

To Chief Mustafa:

In response to your recent request, I am writing to confirm that Physio-Control, division of Medtronic, Inc., is the only source from which to obtain the LIFEPAK® family of products, including upgrades, and services in your marketplace. Physio-Control does not utilize the services of any authorized dealers or distributors in the sale of our products in your marketplace.

Best regards,

A handwritten signature in black ink, appearing to read "Gorman Wong", written in a cursive style.

Gorman Wong  
Customer Support Services Director



Physio-Control, Inc.  
11811 Willows Road NE, P.O. Box 97006, Redmond, WA 98052  
Tel 425.867.4000 Toll-free 800.442.1142

[www.physio-control.com](http://www.physio-control.com)

October 15, 2009

Seminole County Fire Rescue EMS Division  
Lisa Spillman  
150 Bush Blvd  
Sanford, FL 32773

To Ms. Spillman:

In response to your recent request, I am writing to confirm that Physio-Control, division of Medtronic, Inc., is the only source from which to obtain the LIFEPAK® family of products, including upgrades, and services in your marketplace. Physio-Control does not utilize the services of any authorized dealers or distributors in the sale of our products in your marketplace.

Best regards,

A handwritten signature in black ink, appearing to read "Gorman Wong", written in a cursive style.

Gorman Wong  
Customer Support Services Director

# AUTHORIZATION TO PURCHASE GOODS

**Ship To:**  
**Seminole County Fire Department**  
**ATTN: EMS Group**  
**201 Valentine Way**  
**Longwood, FL 32750**  
**Phone: (407) 665-5051**  
**Fax: (407) 665-5010**

<b>Completed by the Business Office ONLY</b>	
P.O.	<input checked="checked" type="checkbox"/>
Visa	<input type="checkbox"/>
Account #	056100-51201642 LI#3
Requisition	

**Vendor Name** Physio-Control, Inc.  
**Point of Contact** Susan Cote  
**Address** 11811 Willows Rd. NE  
Redmond, WA 98073-9723  
**Phone** 800.442.1142  
**Fax** 800.732.0956

**Please Attach Required Quote**  
**Quote Must Include Freight Costs**

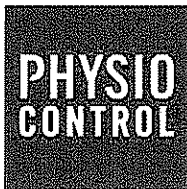
Vendor P/N MFG P/N	Description: Full Description/Color/Size	Unit of Measure	Unit Price	Item Qty	Total Cost
99577-000056	Physio-Control LifePak 15 with all necessary accessories, batteries charger, cables and case See attached Quote Includes \$10,000 in trade ins.	1	\$29,815.35	5	\$149,076.75
<b>Freight Cost</b>					\$99.09
<b>Total</b>					\$149,175.84

**\*\* Attach All Back-up Information, Quote and additional justification (if needed).**

**Justification:** These are the new model Lifepak cardiac monitor, defibrillator, pacer. Part of the capital replacement project for monitors that have exceeded their service life and are scheduled for replacement. - Sole source letter also attached.

**Division Chief** I. A. Mustafa, Division Chief  
**Finance:** Debbie [Signature]  
**Fire Chief's Office** [Signature]  
**Director** [Signature]

**Date:** 7/29/2009  
**Date:** 10/20/09  
**Date:** 10/20/09  
**Date:** 10/20/09



**Physio-Control, Inc.**  
 11811 Willows Road NE  
 P.O. Box 97023  
 Redmond, WA 98073-9723 U.S.A  
 www.physio-control.com  
 www.medtronic.com  
 tel 800.442.1142  
 fax 800.732.0956

To: Chief Ivan Mustafa  
 Seminole Co Fire and Rescue  
 150 Bush Blvd  
 SANFORD, FL 32773  
 Phone: (407) 665-5051  
 imustafa@seminolecountyfl.gov

**Quote#:** 1-142946543

Rev#: 5

Quote Date: 11/05/2009

Sales Consultant: Susan Cote  
 800-442-1142 x 72485

FOB: Redmond, WA

Terms: Net 30, all quotes subject to credit approval  
 and the following terms & conditions

**SEE SERIAL NUMBERS BELOW**

Contract: None

**Exp Date:** 01/04/2010

Line	Catalog # / Description	Qty	Price	Unit Disc	Trade-In	Unit Price	Ext Total
1	99577-000056 - LP15 MONITOR/DEFIB, CPR, Pace, to 360J, SPO2/CO/MetHb, 12L GL, NIBP, CO2, Trend	5	\$35,395.00	\$6,371.10	\$2,600.00	\$26,423.90	\$132,119.50
2	41577-000007 - LP15 SHIP KIT	5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	11996-000091 - EDGE SYSTEM ELECTRODES WITH QUIK-COMBO CONNECTOR	10	\$37.00	\$37.00	\$0.00	\$0.00	\$0.00
	ACCESSORY 11996-000091OEM ELCTD 14 LANG						
4	21330-001365 - TEST LOAD	5	\$84.00	\$84.00	\$0.00	\$0.00	\$0.00
	ASSY - TEST LOAD, ENGLISH						
5	11577-000004 - STATION BATTERY CHARGER	5	\$1,495.00	\$299.00	\$0.00	\$1,196.00	\$5,980.00
	AC OPERATION FOR STATIONARY APPLICATIONS, FOR USE WITH THE LI-ION 5.7 AMP BATTERY. INCLUDES AC POWER CORD, MOUNTING BRACKET AND OPERATING INSTRUCTIONS						
6	21330-001176 - LI-ION BATTERY 5.7 AMP HOUR CAPACITY	20	\$379.00	\$56.85	\$0.00	\$322.15	\$6,443.00
	RECHARGEABLE LITHIUM-ION, WITH FUEL GAUGE						
7	11577-000002 - KIT - CARRY BAG, MAIN BAG	5	\$250.00	\$37.50	\$0.00	\$212.50	\$1,062.50
	ACCESSORY 11577-000002 LP15 KIT CRY BAG						
8	11577-000001 - KIT - CARRY BAG, SHOULDER STRAP	5	\$28.00	\$28.00	\$0.00	\$0.00	\$0.00
	ACCESSORY 11577-000001 LP15 KIT CRY BAG						
9	11260-000039 - KIT - CARRY BAG, REAR POUCH	5	\$65.00	\$9.75	\$0.00	\$55.25	\$276.25
	KIT - CARRY BAG, REAR POUCH						
10	11220-000028 - Top Pouch	5	\$46.00	\$6.90	\$0.00	\$39.10	\$195.50
	Storage for sensors and electrodes. Insert in place of standard paddles.						

**GRAND TOTAL**

**\$146,076.75**

**Trade-in Detail**

Product	Qty	Unit Value	Total Value
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# SEMINOLE COUNTY - PURCHASING AND CONTRACTS DIVISION

*Schedule  
BCC  
12/8/09*

☐ SINGLE SOURCE

☒ SOLE SOURCE

☐ PROPRIETARY SOURCE

Date Requested: 12 NOV 09

JDE No.: \_\_\_\_\_

Requestor: I.A. Mustafa, DC, EMS Telephone/Ext.: 5051 Department/Division: Public Safety/FR

Description of Products/Services: Physio Control - LifePak® Family of Cardiac Monitor Defibrillators

Make LifePak® Manufacturer Physio-Control Model# LifePak @ 15

Support justification (Please attach additional information as appropriate): The Seminole County Fire Department has maintained a standardized monitor defibrillator for the last 15 years. Physio Control LifePak family of products has been our standard monitor for emergency responses. Physio Control has upgraded the technology of the LifePak 12 models and introduced the LifePak 15 as their new standard device. Physio Control is the sole source to obtain LifePak monitor defibrillators, supplies, services and upgrades to these devices. Please see attached sole source letter.

Proposed Vendor: Physio Control a Division of Medtronic, Inc. Phone# 800-442-1142

Other Companies contacted: (Attach documentation of each firm contacted)

## Compliance:

Does the requirement comply with the definition of sole/proprietary source as described in Section 220.47 ☒ Yes ☐ No

Is this commodity or service of a "unique nature" that would support a "Single Source" justification? ☒ Yes ☐ No  
If you answer "YES", please explain in details.

Necessary: Is this commodity or service necessary to accomplish the County's task or mission? ☒ Yes ☐ No

Unique: Is this commodity or service, or some necessary features, unique to this source? ☒ Yes ☐ No

Compliance with Bid Tampering (F.S. 838.22) is acknowledged by signatures below:

Requesting Division Manager's Signature: [Signature] Date: 11/12/09

Requesting Department Director's Signature: [Signature] Date: 11/12/09

## Purchasing and Contracts Division Determination:

Analyst	<input type="checkbox"/> Approval	<input type="checkbox"/> Disapproval	Date: _____
Supervisor/Manager	<input type="checkbox"/> Approval	<input type="checkbox"/> Disapproval	Date: _____

Description Posted (at least 7 business days): From \_\_\_\_\_ to \_\_\_\_\_  
Determination Posted (at least 3 business days): From \_\_\_\_\_ to \_\_\_\_\_  
BCC Date, if applicable: \_\_\_\_\_

Comments: \_\_\_\_\_

Purchase Order No.: \_\_\_\_\_ Amount of Purchase: \$ \_\_\_\_\_